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MACFARLANE, Stacey

090931-360630 (T01367-0039-US)

Date

Examiner Name

Attorney Docket Number

			EN	CLOSURES (Check	all that appl	'y)	
V	Fee Tran	smittal Form	V	Drawing(s)			After Allowance Communication to TC
	✓ F	ee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 555.00 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 15-0633 Deposit Account Name: MCCarthy Tétrault LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee J Charge any additional fee(s) or underpayments of fee(s) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fe	
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HP = highest number of total claims paid for, if greater than 20. Indep. Claims	
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3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer	
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50	
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
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4. OTHER FEE(S)	
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 3-month extension of time fee 555.00	
SUBMITTED BY	
Signature Registration No. 47366 Telephone 416 604 7530	
(Attorney/Agent) 47300 47300 476.001.7330	

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